BEST AVAILABLE COPY

PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000 Application or Docket Number 0.1948 848												
CLAIMS AS FILED - PART I (Column 1) (Column 2)								MALL EN	YTITY	OR	OTHER SMALL	
TOTAL CLAIMS			21				Г	RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		В	ASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			2/ minus 20=		• /			X\$ 9=		OR	X\$18=	13
INDEPENDENT CLAIMS			3 minus 3 =				Γ	X40=		OR	X80=	
MU	LTIPLE DEPEN	DENT CLAIM PI	RESENT				l	+135=		OR	+270=	
* If the difference in column 1 is less than zero, enter "0" in column 2						Ļ	TOTAL		OR	TOTAL	728	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMALL	ENTITY	OR	OTHER SMALL	
ENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI		PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT A	Total	. 20	Minus	** ~	<i>غا</i>	=		X\$ 9=		OR	X\$18=	
	Independent	• 3	Minus	***	3	=		X40=		OR-	X80=	
	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDEN	T CLAIM			+135=		OR	+270=	
	a [*]						<u>L</u>	TOTAL DDIT, FEE		OR	TOTAL ADDIT, FEE	
	len	~~	<i>70</i> 11. FES			ADDIII. FEE						
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		= .		X\$ 9=		OR	X\$18=	
	Independent	NTATION OF M	Minus	***	T CL ABA	-		X40=		OR	X80=	
	THO THESE	NIATION OF M	OCHIPEE DEP	ENUEN	1 ODAIN		' [+135=		OR	+270=	
							AD	TOTAL ODIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu	mn 2)	(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST ABER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=	•
	Independent	•	Minus	***		=		X40=			X80=	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR		
+135=										OR	+270=	
"If the entry in column 1 is less than the entry in column 2, write "0" in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

FORM PTO-875 (Rev. 8/00)